PTO/SB/31 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trad emark Office; U.S. DEPARTMENT OF COMMERCE

Index the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number NOTICE OF APPEAL FROM THE EXAMINER TO Docket Number (Optional) THE BOARD OF PATENT APPEALS AND INTERFERENCES OHT-0022 In re Application of Atsushi Hikita Filed Application Number November 21, 2003 10/717,538-Conf. #7981 DECORATIVE MOLDED OBJECT HAVING COLOR DESIGN IMAGE AND METHOD OF PRODUCING THE SAME Art Unit Examiner 1734 S. Mazumdar Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) 500.00 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 18-0013 . I have enclosed a duplicate copy of this sheet. A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed I am the applicant /inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) David T. Nikaido is enclosed. (Form PTO/SB/96) Typed or printed name x attorney or agent of record. 22,663 Registration number (202) 955-3750 Telephone number attorney or agent acting under 37 CFR 1.34. January 25, 2007 Registration number if acting under 37 CFR 1.34. Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*. \*Total of forms are submitted.

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PTO/SB/17 (07-06)
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

		Complete if Known										
Fees pursuant to t	818).	Application Number 10/717,538-C			onf. #7981							
FEE	Filing Date		November 21,	2003								
For FY 2006				First Named Inve	entor /	Atsushi Hikita						
	FULL 1	700	{	Examiner Name C. Mazumdar								
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1734								
TOTAL AMOU	NT OF PAYMENT	(\$) 500.00	Attorney Docket No. OHT-0022									
METHOD OF	METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC												
For the	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of gee(s) under 37 CFR 1.16 and 1.17												
FEE CALCU	LATION				•							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES												
	FI		SE/	ARCH FEES	EXAMIN	IATION FEES						
Application Ty	ype Fee (\$	Small Entity ) Fee (\$) F	ee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CL	AIM FEES	,	_	-	_	-		Small Entity				
Fee Description	<del>-</del>						Fee (\$)	Fee (\$)				
Each claim over	r 20 (including Reiss	sues)					50	25				
Each independe	ant claim over 3 (incl	uding Reissues)					200	100				
Multiple depend	dent claims						360	180				
Total Claims Extra Claims Fee (\$) Fee (			Paid (\$) Multiple Dependent			nt Claims						
		× =			<u>Fe</u>	<u>e (\$)</u>	Fee Paid (	<u>\$)</u>				
HP = highest num	ber of total claims paid for	r, if greater than 20.				<del></del>						
Indep. Claims	Extra Claims	Fee (\$)	Fee F	Paid (\$)								
HP = highest num	- = ber of independent claims	<b>^</b>										
ı	3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
1							_					
Total Sheet	<u>Extra Sheet</u>	s <u>Number of e</u> /50		dditional 50 or frac			<u>Fee</u> =	Paid (\$)				
- 100 = /50 (round up to a whole number) x =												
Non-English Specification, \$130 fee (no small entity discount)												
	Other (e.g., late filing surcharge): 1401 Notice of appeal 500.00											
SUBMITTED BY												
Signature		<del>//                                   </del>		Registration No.	22,663	Telephone	(202) 95	55-3750				
- Grandian a	/ 3 /			(Attorney/Agent)	22,003	, GIOPITOTIO	(202) 30	70-01-00				

SUBMITTED BY									
Signature			<u> </u>			Registration No. (Attorney/Agent)	22,663	Telephone	(202) 955-3750
Name (Print/Type)	David T. N	likaido	/	BRIAN	L	Mon	47,250	Date	January 25, 2007
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